

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/788,596-Conf. #6817
		Filing Date	February 27, 2004
		First Named Inventor	Dale A. Sather
		Examiner Name	D. K. Cao
		Art Unit	2194
TOTAL AMOUNT OF PAYMENT		(\$)	810.00
		Attorney Docket No.	M1103.70668US00

<b>METHOD OF PAYMENT (check all that apply)</b>	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account    Deposit Account Number: <u>23/2825</u> Deposit Account Name: <u>Wolf, Greenfield &amp; Sacks, P.C.</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

<b>FEE CALCULATION</b>																					
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																					
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)														
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)															
Utility	330	165	540	270	220	110															
Design	220	110	100	50	140	70															
Plant	220	110	330	165	170	85															
Reissue	330	165	540	270	650	325															
Provisional	220	110	0	0	0	0															
<b>2. EXCESS CLAIM FEES</b>							Small Entity														
Fee Description							Fee (\$)														
Each claim over 20 (including Reissues)							52														
Each independent claim over 3 (including Reissues)							220														
Multiple dependent claims							390														
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Total Claims</td> <td style="text-align: center;">Extra Claims</td> <td style="text-align: center;">Fee (\$)</td> <td style="text-align: center;">Fee Paid (\$)</td> <td style="text-align: center;">Multiple Dependent Claims</td> <td style="text-align: center;">Fee (\$)</td> <td style="text-align: center;">Fee Paid (\$)</td> </tr> <tr> <td style="text-align: center;">- 20 or HP</td> <td style="text-align: center;">x</td> <td style="text-align: center;">=</td> <td style="text-align: center;">=</td> <td style="text-align: center;">=</td> <td style="text-align: center;">=</td> <td style="text-align: center;">=</td> </tr> </table>							Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	- 20 or HP	x	=	=	=	=	=	
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)															
- 20 or HP	x	=	=	=	=	=															
HP = highest number of total claims paid for, if greater than 20.																					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Indep. Claims</td> <td style="text-align: center;">Extra Claims</td> <td style="text-align: center;">Fee (\$)</td> <td style="text-align: center;">Fee Paid (\$)</td> <td style="text-align: center;">Multiple Dependent Claims</td> <td style="text-align: center;">Fee (\$)</td> <td style="text-align: center;">Fee Paid (\$)</td> </tr> <tr> <td style="text-align: center;">- 3 or HP</td> <td style="text-align: center;">x</td> <td style="text-align: center;">=</td> <td style="text-align: center;">=</td> <td style="text-align: center;">=</td> <td style="text-align: center;">=</td> <td style="text-align: center;">=</td> </tr> </table>							Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	- 3 or HP	x	=	=	=	=	=	
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)															
- 3 or HP	x	=	=	=	=	=															
HP = highest number of independent claims paid for, if greater than 3.																					
<b>3. APPLICATION SIZE FEE</b>																					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																					
Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)														
- 100 =		/50 =		(round up to a whole number) x		=	=														
							Fees Paid (\$)														
<b>4. OTHER FEE(S)</b>																					
Non-English Specification, \$130 fee (no small entity discount)																					
Other (e.g., late filing surcharge): Request for Continue Examination							810.00														

<b>SUBMITTED BY</b>			
Signature	Registration No.	32,950	Telephone
Name (Print/Type)	(Attorney/Agent)	Edmund J. Walsh	617.646.8000
		Date	Nov. 2, 2010

<b>Certificate of Electronic Filing Under 37 CFR 1.8</b>	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.8(a)(4).	
Dated: <u>Nov. 2, 2010</u>	Signature: <u>Daniel Calder</u>